

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTY AND LEADERSHIP FUND

ADDRESS (number and street)

115 EAST PARK AVENUE SUITE 1

☐ Check if different than previously reported. (ACC)

TALLAHASSEE

FL

32301

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00554782

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 03 2014

through

M M M / D D D / Y Y Y Y Y Y
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William Stafford Jones

Signature of Treasurer

William Stafford Jones

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 13 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTY AND LEADERSHIP FUND

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 03 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	70860.34	
(c) Total Receipts (from Line 19)	185000.00	734569.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	255860.34	734569.89
7. Total Disbursements (from Line 31)	241103.12	719812.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14757.22	14757.22
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTY AND LEADERSHIP FUND

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	185000.00	395000.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	185000.00	395100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	339469.89
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	185000.00	734569.89
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	185000.00	734569.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	185000.00	734569.89

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	250.00
24. Independent Expenditures (use Schedule E)	235799.37	692201.48
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	5053.75	27361.19
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	241103.12	719812.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	241103.12	719812.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	185000.00	734569.89
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	185000.00	734569.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Associated Industries of Florida

Mailing Address PO Box 784

City

Tallahassee

State

FL

Zip Code

32302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.4297

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. FCCI Services, Inc.

Mailing Address 6300 University Parkway

City

Sarasota

State

FL

Zip Code

34240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.4292

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Florida CrystalsMailing Address 1 N Clematis Street
#200

City

West Palm Beach

State

FL

Zip Code

33401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11AI.4286

Amount of Each Receipt this Period

25000.00

Wire

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Florida Leadership Committee

Mailing Address 610 South Blvd

City State Zip Code
Tampa FL 33606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2014

Transaction ID : SA11AI.4295

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Innovate Florida

Mailing Address 610 S. Boulevard

City State Zip Code
Tampa FL 33606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.4299

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Lee FP Inc.

Mailing Address 9800 S Healthpark Drive

City State Zip Code
Fort Myers FL 33908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Ronald Book, PA

Mailing Address 18851 NE 29th Avenue
Suite 1010

City State Zip Code
Aventura FL 33180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11AI.4288

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. U.S. Sugar Corp

Mailing Address 111 Ponce De Leon Ave

City State Zip Code
Clewiston FL 33440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27500.00

185000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. PRINCIPLED LEADERSHIP FUND

Mailing Address 115 EAST PARK AVENUE SUITE 1

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement
Contribution To Political Committee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SB23.4275

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 2930 Apalachee Parkway

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SB29.4285

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 2930 Apalachee Parkway

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SB29.4283

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 2930 Apalachee Parkway

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SB29.4284

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

Transaction ID : SB29.4282

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		14		2014

Transaction ID : SB29.4281

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Transaction ID : SB29.4280

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

55.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SB29.4279

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fee

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2014

Transaction ID : SB29.4277

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 2930 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2014

Transaction ID : SB29.4278

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTY AND LEADERSHIP FUND

Full Name (Last, First, Middle Initial)

A. Coates Law FirmMailing Address 115 East Park Avenue
Suite 1

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

Transaction ID : SB29.4274

Amount of Each Disbursement this Period

4158.75

Full Name (Last, First, Middle Initial)

B. Electioneering Consulting, Inc.Mailing Address 3539 Apalachee Parkway
#212

City Tallahassee State FL Zip Code 32311

Purpose of Disbursement
Management and Bookkeeping

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

Transaction ID : SB29.4273

Amount of Each Disbursement this Period

720.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4878.75

5053.75

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 14 OF 22
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LIBERTY AND LEADERSHIP FUND			FEC IDENTIFICATION NUMBER ▼ C C00554782	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee Data Targeting, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 6211 NW 132nd Street			Amount 14700.00	
City Gainesville	State FL	Zip Code 32653	Transaction ID : SE.4186	
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 03 / 2014	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		466280.08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>	
Full Name of Payee Data Targeting, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 6211 NW 132nd Street			Amount 14669.51	
City Gainesville	State FL	Zip Code 32653	Transaction ID : SE.4258	
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		649199.59	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u>	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			29369.51	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>William Stafford Jones</i>		[Electronically Filed]		Date MM / DD / YYYY 07 / 13 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 22
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LIBERTY AND LEADERSHIP FUND			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00554782</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee Data Targeting, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 15 / 2014</div>	
Mailing Address 6211 NW 132nd Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>	
City Gainesville		State FL	Zip Code 32653	
Purpose of Expenditure Advocacy Phone Calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.4259 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 16 / 2014</div>
Name of Federal Candidate MICHAEL JOHN DREIKORN			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-top: 5px;">657199.59</div>	
Full Name of Payee Data Targeting, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 16 / 2014</div>	
Mailing Address 6211 NW 132nd Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14699.51</div>	
City Gainesville		State FL	Zip Code 32653	
Purpose of Expenditure Direct Mail		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.4260 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 16 / 2014</div>
Name of Federal Candidate LIZBETH BENACQUISTO			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-Primary</u> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-top: 5px;">671899.10</div>	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">22699.51</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Signature <div style="border-bottom: 1px solid black; width: 100%; margin-top: 5px;"></div> <i>William Stafford Jones</i></div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 30%; text-align: right;">Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">07 / 13 / 2014</div></div></div>				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 16 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LIBERTY AND LEADERSHIP FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00554782 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; text-align: right;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee Data Targeting, Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">17</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 6211 NW 132nd Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1547.93</div>	
City Gainesville	State FL	Zip Code 32653	Transaction ID : SE.4266 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">17</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>
Purpose of Expenditure Direct Mail		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate MICHAEL JOHN DREIKORN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">673447.03</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>

Full Name of Payee Mentzer Media Services, Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 600 Fairmount Avenue Suite 306		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">66000.00</div>	
City Towson	State MD	Zip Code 21286	Transaction ID : SE.4241 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>
Purpose of Expenditure Television Advertisement		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">538780.08</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">67547.93</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Stafford Jones

[Electronically Filed]

Date

M M M

 /

D D D

 /

Y Y Y Y Y Y

07

 /

13

 /

2014

Signature

Full Name of Payee The Victory Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014	
Mailing Address 1220 Hillshire Rd.		Amount 6500.00	
City Baltimore	State MD	Zip Code 21222	Transaction ID : SE.4191 Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014
Purpose of Expenditure Television Ad Production		Category/ Type 004	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 472780.08		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Special-Primary	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	99500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

FEC Schedule E (Form 3X) Rev. 09/2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 22
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LIBERTY AND LEADERSHIP FUND		FEC IDENTIFICATION NUMBER ▼ C C00554782
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee The Victory Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014
Mailing Address 1220 Hillshire Rd.		Amount 1500.00
City Baltimore	State MD	Zip Code 21222
Purpose of Expenditure Television Advertisement Production	Category/Type 004	Transaction ID : SE.4246 Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2014
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate		<input checked="" type="checkbox"/> House District: <u>19</u> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>
		540280.08

Full Name of Payee The Victory Group, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014
Mailing Address 1220 Hillshire Rd.		Amount 750.00
City Baltimore	State MD	Zip Code 21222
Purpose of Expenditure Digital Distribution of Media	Category/Type 004	Transaction ID : SE.4249 Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate		<input checked="" type="checkbox"/> House District: <u>19</u> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>
		634030.08

(a) SUBTOTAL of Itemized Independent Expenditures.....	1500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Stafford Jones

[Electronically Filed]

Date

MM / DD / YYYY
07 / 13 / 2014

Signature

: 97 'A -G79 @ @ B9CI G'H9LH'F9 @ H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A -N5HCB
.

Form/Schedule: SE

Transaction ID : SE.4249

We had understood that we had received and paid all invoices pertaining to the IE 24 Hour notice filed on 04-11-14. We then received two additional, unexpected invoices, one for \$500 and one for \$1500, for digital distribution of the media to the television station. Our FEC analyst instructed us to file an amendment and include the memo explaining the reason for the amendment. This amendment includes both the \$500 and \$1500 transaction, and this memo is attached to the \$1500 transaction.

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 22
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LIBERTY AND LEADERSHIP FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00554782 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; text-align: right;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee The Victory Group, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 1220 Hillshire Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
City Baltimore	State MD	Zip Code 21222	Transaction ID : SE.4253 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">15</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>
Purpose of Expenditure Digital Distribution of Media		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">634530.08</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>

Full Name of Payee The Victory Group, Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">17</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>	
Mailing Address 1220 Hillshire Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5182.42</div>	
City Baltimore	State MD	Zip Code 21222	Transaction ID : SE.4267 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">17</div> / <div style="border: 1px solid black; padding: 2px;">2014</div> </div>
Purpose of Expenditure Television Advertising		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">678629.45</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► <u>Special-Primary</u>

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">5182.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Stafford Jones

[Electronically Filed]

Date

07

 /

13

 /

2014

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98`HC`5`F9DCFHŽG7<98I @`CF`+H9A-N5HCB
.

Form/Schedule: SE

Transaction ID : SE.4253

We had understood that we had received and paid all invoices pertaining to the IE 24 Hour notice filed on 04-11-14. We then received two additional, unexpected invoices, one for \$500 and one for \$1500, for digital distribution of the media to the television station. Our FEC analyst instructed us to file an amendment and include the memo explaining the reason for the amendment. This amendment includes both the \$500 and \$1500 transaction, and this memo is attached to the \$500 transaction.

Form/Schedule:

Transaction ID:

Full Name of Payee The Victory Group, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2014	
Mailing Address 1220 Hillshire Rd.		Amount 10000.00	
City Baltimore	State MD	Zip Code 21222	Transaction ID : SE.4268
Purpose of Expenditure Television Advertising		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 18 / 2014
Name of Federal Candidate LIZBETH BENACQUISTO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought 688629.45		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► Special-Primary	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount \$
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	235799.37

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature

07 / 13 / 2014